

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RELY ON YOUR BELIEFS FUND

ADDRESS (number and street)

ONE CONSTITUTION AVE NE STE 300

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344648

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☒ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2018

through

M M M / D D D / Y Y Y Y Y Y
04 30 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KILGORE, PAUL, , ,

Type or Print Name of Treasurer

Signature of Treasurer

KILGORE, PAUL, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
05 18 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RELY ON YOUR BELIEFS FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		261354.35
(b) Cash on Hand at Beginning of Reporting Period.....	268520.80	
(c) Total Receipts (from Line 19)	22700.00	234857.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	291220.80	496211.75
7. Total Disbursements (from Line 31).....	30442.08	235433.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	260778.72	260778.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RELY ON YOUR BELIEFS FUND

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 04 / 01 / 2018

To:

 M M / D D / Y Y Y Y Y
 04 / 30 / 2018
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

25500.00

(ii) Unitemized

200.00

200.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

200.00

25700.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

22500.00

203000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

22700.00

228700.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

6157.40

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

22700.00

234857.40

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

22700.00

234857.40

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	30442.08	135433.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	30442.08	135433.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	100000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	30442.08	235433.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30442.08	235433.03

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	22700.00	228700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22700.00	228700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	30442.08	135433.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	6157.40
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30442.08	129275.63

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICA

Mailing Address 4301 WILSON BOULEVARD

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

04 / **16** / **2018**

Transaction ID : A9412B61A96C244CC871

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD
SUITE 400

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C C00113241

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

04 / **16** / **2018**

Transaction ID : AF75CBF2CFFF3494BA36

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PAC)

Mailing Address 1201 15TH STREET NW
SUITE 400

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C C00358663

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

04 / **16** / **2018**

Transaction ID : A85463A5712144FB2A28

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 16

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 BREN ROAD EAST

City
MINNETONKA

State
MN

Zip Code
55343

FEC ID number of contributing
federal political committee.

C

C00274431

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2018

Transaction ID : A64AC331A91AE4931968

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAC)

Mailing Address 1201 15TH STREET, NW

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

C00000901

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2018

Transaction ID : A365BBCA640C3433A9E6

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

10000.00

TOTAL This Period (last page this line number only)..... ►

22500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. VISA

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		05		2018

Mailing Address PO BOX 4512

City
CAROL STREAMState
ILZip Code
60197-4512Purpose of Disbursement
PAC CC SERVICE FEE

Candidate Name

Category/
Type

FEC Identification Number

C Transaction ID : BA7960CBFC

Amount of Each Disbursement this Period

29.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. BLUE SKY TECH

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		05		2018

Mailing Address PO BOX 3663

City
JACKSONState
WYZip Code
83001Purpose of Disbursement
PAC IT SERVICES

Candidate Name

Category/
Type

FEC Identification Number

C Transaction ID : BC947820794

Amount of Each Disbursement this Period

225.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. VICTORY ENTERPRISES

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2018

Mailing Address 5200 30TH ST SW

City
DAVENPORTState
IAZip Code
52802-3039Purpose of Disbursement
PAC IT SERVICES

Candidate Name

Category/
Type

FEC Identification Number

C Transaction ID : BC6495B6B1

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

454.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES, INC.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2018

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605Purpose of Disbursement
PAC COMPLIANCE SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : BDDCA4403E**

Amount of Each Disbursement this Period

1510.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NORFOLK SOUTHERN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2018

Mailing Address ONE CONSTITUTION AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
PAC RENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B2825851EBE**

Amount of Each Disbursement this Period

1014.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RESTAURANT ASSOCIATES

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2018

Mailing Address PO BOX 91337

City
CHICAGOState
ILZip Code
60693Purpose of Disbursement
PAC MEETING EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : BCC0FFC61E**

Amount of Each Disbursement this Period

1100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3624.31

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. BLUE SKY TECH

Mailing Address PO BOX 3663

City
JACKSONState
WYZip Code
83001Purpose of Disbursement
PAC IT SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	8

FEC Identification Number

C **Transaction ID : B1DE93F053**

Amount of Each Disbursement this Period

 112.50☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES, INC.

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605Purpose of Disbursement
PAC COMPLIANCE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	8

FEC Identification Number

C **Transaction ID : B8818C1A27**

Amount of Each Disbursement this Period

 1510.31☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CITI CARDS

Mailing Address PO BOX 183037

City
COLUMBUSState
OHZip Code
43218Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	8

FEC Identification Number

C **Transaction ID : BF11D31C76**

Amount of Each Disbursement this Period

 1653.90☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 3276.71

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. CITI CARDS

Mailing Address PO BOX 183037

City
COLUMBUSState
OHZip Code
43218Purpose of Disbursement
PAC CC ANNUAL FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C **Transaction ID : B35F46E3CE**

Amount of Each Disbursement this Period

 450.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BIG SKY LODGING

Mailing Address 75 SITTING BULL RD

City
BIG SKYState
MTZip Code
59716Purpose of Disbursement
PAC TRAVEL EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C **Transaction ID : B11FE052F06**

Amount of Each Disbursement this Period

 694.41☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AVIS RENT-A-CAR

Mailing Address 6 SYLVAN WAY

City
PARSIPPANYState
NJZip Code
07054-3826Purpose of Disbursement
PAC CAR RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	8		

FEC Identification Number

C **Transaction ID : B6D426F2AF**

Amount of Each Disbursement this Period

 228.23☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. VISA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2018

Mailing Address PO BOX 4512

City
CAROL STREAMState
ILZip Code
60197-4512Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : B1D1C0B56E

Amount of Each Disbursement this Period

3595.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE MONOCLE RESTAURANT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2018

Mailing Address 107 D ST NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
PAC EVENT CATERING

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : BEE1E99D56

Amount of Each Disbursement this Period

699.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2018

Mailing Address PO BOX 6463

City
CAROL STREAMState
ILZip Code
60197Purpose of Disbursement
PAC TELEPHONE

Candidate Name

Category/
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : B111C870F7

Amount of Each Disbursement this Period

291.64

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

3595.63

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. UPS

Mailing Address PO BOX 72470244

City
PHILADELPHIAState
PAZip Code
19170Purpose of Disbursement
PAC SHIPPING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C **Transaction ID : BF874C4564**

Amount of Each Disbursement this Period

 149.88☒ Memo Item

Full Name (Last, First, Middle Initial)

B. RPM ITALIAN

Mailing Address 650 K ST NW

City
WASHINGTONState
DCZip Code
20001-1341Purpose of Disbursement
PAC EVENT CATERING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C **Transaction ID : B9831CD988**

Amount of Each Disbursement this Period

 826.84☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WINDOWS CATERING

Mailing Address 5724 GENERAL WASHINGTON DR

City
ALEXANDRIAState
VAZip Code
22312-2407Purpose of Disbursement
PAC EVENT CATERING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	6			2	0	1	8		

FEC Identification Number

C **Transaction ID : BFBB6FADE**

Amount of Each Disbursement this Period

 932.46☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. CLASSIC LIMO

Mailing Address PO BOX 912

City
BIG SKYState
MTZip Code
59716-0912Purpose of Disbursement
PAC TRANSPORTATION

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2018

FEC Identification Number

C**Transaction ID : B6EF92011C**

Amount of Each Disbursement this Period

504.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 360001

City
FT. LAUDERDALEState
FLZip Code
33336Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2018

FEC Identification Number

C**Transaction ID : BCCB1D9AB**

Amount of Each Disbursement this Period

6579.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOE'S SEAFOOD, PRIME STEAK & STONE CRAB

Mailing Address 750 15TH ST NW

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
PAC EVENT CATERING

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2018

FEC Identification Number

C**Transaction ID : B48330F97B**

Amount of Each Disbursement this Period

3792.94

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6579.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD.

City
ARLINGTON HEIGHTSState
ILZip Code
60005Purpose of Disbursement
PAC TRAVEL EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	8		

FEC Identification Number

C**Transaction ID : B5C074048A**

Amount of Each Disbursement this Period

2736.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMPSON COMMUNICATIONS

Mailing Address PO BOX 5

City
MARSHFIELDState
MOZip Code
65706Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : BCC6A605F8**

Amount of Each Disbursement this Period

12897.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HAYES, KERI ANN, , ,Mailing Address ONE CONSTITUTION AVE NE
STE 300City
WASHINGTONState
DCZip Code
20002-5618Purpose of Disbursement
PAC SALARY & BENEFITS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	8		

FEC Identification Number

C**Transaction ID : B00C6A0E1E**

Amount of Each Disbursement this Period

12167.82

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12897.89

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. THOMPSON COMMUNICATIONS

Mailing Address PO BOX 5

City
MARSHFIELDState
MOZip Code
65706Purpose of Disbursement
PAC PAYROLL EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2018

FEC Identification Number

C**Transaction ID : B95EDA9E2F**

Amount of Each Disbursement this Period

730.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

30427.88